## DECLARATION and POWER OF ATTORNEY DOCKET NO. HN 16.741 As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled Semiconductor device with a bipolar transistor, and method of manufacturing such a method" the specification of which (check one) is attached hereto. was filed on February 9, 1999 as Application Serial No.09/247,782 and was amended on I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by the amendment(s) referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with I acknowledge the duty to disclose information which is material to the states of the APP.NUMBER DATE OF FILING PRIORITY (DATE, MONTH, YEAR) CLAIMED UNDER 35 Europe 98200394.9 9 February 1998 I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35 United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1,56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application: PRIOR UNITED STATES APPLICATION(S) APPLICATION SERIAL NUMBER FILING DATE STATUS (PATENTED, PENDING, ABANDONED) hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number) Algy Tamoshunas, Reg. No. 27,677 Jack E. Haken, Reg. No. 26,902 SEND CORRESPONDENCE TO: Corporate Patent Counsel; U.S. Philips Corporation; 580 White Plains Road; Tartytown, NY 10591 DIRECT TELEPHONE CALLS TO: (name and telephone No.) (914) 332-0222 Dated: March 5, 1999 Inventor's Signature: Full-Name of Last Name HURKX First Name Godefridus Middle Name A.M. Inventor Residence & State or Foreign Country Country of Citizenship Citizenship <u>Eindhoven</u> The Netherlands The Netherlands Post Office Street State or Country Zip Code Address Prof. Holstlaan 6 5656 AA Eindhoven The Netherlands Dated: March 10, 1999 Inventor's Signature: , Ll Full Name of Last Name First Name Holger Middle Name Inventor SCHLIGTENHORST

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